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## \*\* CONTINUING DATA \*\*\*\*\*

*No M.Z.*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*No M.Z.*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/19/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 4	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>M.Z.</i> Initials			

## ADDRESS

35195

## TITLE

Methods and arrangements for automated change plan construction and impact analysis

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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